Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5		print in ink. COVER PAGE CALIFORNIA 460
0000 00000113 04200-04210.5	Statement covers per from 01/01/2006	Page 1 of 54
SEE INSTRUCTIONS ON REVERSE	through03/17/2006	REGISTRAR OF VOTERS For Official Use Only 06/06/2006 By Sulface Deputy
1. Type of Recipient Committee: Officeholder, Candidate Controlled Co State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee Political Party/Central Committee Committee Information	ommittee ee Primarily Formed Ballot Measure Committee Controlled Sponsored (Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	2. Type of Statement: Preelection Statement
COMMITTEE NAME (OR CANDIDATE'S NAME Pat Bates for Supervisor STREET ADDRESS (NO P.O BOX)	I.D. NUMBER 1265511 IF NO COMMITTEE)	Treasurer(s) NAME OF TREASURER Betty Presley MAILING ADDRESS
MAILING ADDRESS (IF DIFFERENT) NO. AND	STATE ZIP CODE AREA CODE/PHONE	E NAME OF ASSISTANT TREASURER, IF ANY MAILING ADDRESS
CITY	CTATE	
OPTIONAL: FAX / E-MAIL ADDRESS	STATE ZIP CODE AREA CODE/PHONE .	STATE ZIP CODE AREA CODE/PHONE OPTIONAL: FAX / E-MAIL ADDRESS

Recipient Committee Campaign Statement Cover Page — Part 2

COVERP	AGE - PART 2
CALIFORNIA FORM	460
Paye _2	of <u>54</u>

ommittee	. 6	Drimonily Forms 1 5 1			of <u>54</u>
	υ.		ot Measur	e Committee	
		NAME OF BALLOT MEASURE			
		·			
ISTRICT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICT	TION	SUPPORT
CITY STATE ZIP					OPPOSE
		Identify the controlling of	ficeholder, c	andidate, or state measi	are proponent, if a
		NAME OF OFFICEHOLDER, CA	NDIDATE, OR F	PROPONENT	,
s Statement: List any committees					
	,	· OFFICE SOUGHT OR HELD			
ur candidacy.		STATE OF THE D		DISTRICT	NO. IF ANY
I.D. NUMBER					
'					
CONTROLLED COMMITTEE?	7.	Primarily Formed Can	didate/Offi	iceholder Committee	
☑ YES □ NO		officeholder(s) or candidate(s) for which th	his committee is primarily i	List names of formed.
P.O. BOX)					
			- HUDONIE	OFFICE SOUGHT OR HEI	D SUPPORT
ZIP CODE AREA CODE/PHONE					OPPOSE
TOTAL TOTAL		NAME OF OFFICEHOLDER OR C	CANDIDATE	OFFICE SOUGHT OR HEL	D -
LD NUMBER					SUPPORT
I.D. NUMBER		NAME OF OFFICE UOLDED OF			OPPOSE
		THE OF OPPICEHOLDER OR C	ANDIDATE	OFFICE SOUGHT OR HEL	.D SUPPORT
CONTROLLED COMMITTEES	•				OPPOSE
l	•	NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOUGHT OF HE	
1		•		IOE GOOGH! OK HEL	∐ SUPPORT
					☐ OPPOSE
200 0005		•			
AREA CODE/PHONE		Aun	h nomther "		
	s Statement: List any committees y you or are primarily formed to receive ur candidacy. I.D. NUMBER 1263599 CONTROLLED COMMITTEE?	SISTRICT NUMBER IF APPLICABLE) S Statement: List any committees by you or are primarily formed to receive ur candidacy. I.D. NUMBER 1263599 CONTROLLED COMMITTEE? YES NO P.O. BOX) ZIP CODE AREA CODE/PHONE CONTROLLED COMMITTEE? YES NO P.O. BOX)	NAME OF BALLOT MEASURE DISTRICT NUMBER IF APPLICABLE BALLOT NO. OR LETTER	NAME OF BALLOT MEASURE DISTRICT NUMBER IF APPLICABLE) BALLOT NO. OR LETTER JURISDIC	NAME OF DEFICE SOUGHT OR HELD

Campaign Disclosure Statement Summary Page

Type or print in ink. Amounts may be rounded to whole dollars.

SUMMARY PAGE Statement covers period **CALIFORNIA** 01/01/2006 **FORM** 03/17/2006 through Page _ 3 _ of 54

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Pat Bates for Supervisor I.D. NUMBER 1265511 Column A Contributions Received Column B **Calendar Year Summary for Candidates** TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROMATTACHED SCHEDULES) TOTALTODATE **General Elections** 1. Monetary Contributions Schedule A, Line 3 \$ 38,133.00 38,133.00 2. Loans Received Schedule B, Line 3 128,000.00 1/1 through 6/30 7/1 to Date 129,000.00 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 \$ 166,133.00 20. Contributions 167,133.00 Received 4. Nonmonetary Contributions Schedule C. Line 3 182.39 182,39 21. Expenditures 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3+4 \$ ____166,315.39 167,315.39 Made **Expenditures Made Expenditure Limit Summary for State Candidates** 7. Loans Made Schedule H, Line 3 0.00 0.00 22. Cumulative Expenditures Made* 179,527.42 (If Subject to Voluntary Expenditure Limit) 9. Accrued Expenses (Unpaid Bills)Schedule F, Line 3 47,475.40 51,344,15 Date of Election 10. Nonmonetary Adjustment Schedule C, Line 3 Total to Date 182.39 . (mm/dd/yy) 182.39 **Current Cash Statement** To calculate Column B, add 13. Cash Receipts Column A, Line 3 above 166,133.00 amounts in Column A to the 14. Miscellaneous Increases to Cash Schedule I, Line 4 corresponding amounts *Amounts in this section may be different from amounts 167.66 from Column B of your last reported in Column B. report. Some amounts in . 179,527.42 Column A may be negative 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 \$ ___ 300,366.44 figures that should be If this is a termination statement, Line 16 must be zero. subtracted from previous period amounts. If this is the first report being filed 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ _____ for this calendar year, only carry over the amounts Cash Equivalents and Outstanding Debts from Lines 2, 7, and 9 (if 0.00 . FPPC Form 460 (January/05)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule A **Monetary Contributions Received**

Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE A

Statement covers period

•		to	whole dollars.	from01/01/2006		CALIFORNIA 460		
	DNS ON REVERSE			through <u>03/17/2</u>	006	Page 4	of 54	
NAME OF FILER Pat Bates f	or Supervisor	•				I.D. NUMBER 1265511		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTERNAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DO CALENDAR YEA (JAN. 1 - DEC. 3	R	R ELECTION TO DATE REQUIRED)	
03/15/2006	AKM Consulting Engineers, Inc.	☐IND ☐COM ※OTH ☐PTY ☐SCC	Or BUSINESS)	100.00	· · · · · · · · · · · · · · · · · · ·	0.00 P06	100.00	
01/31/2006	Craig P. Alexander	⊠IND □COM □OTH □PTY □SCC	Attorney Gauntlett & Associates	25.00	125	5.00 P06	1,25.00	
03/13/2006	Craig P. Alexander	☑IND □COM □OTH □PTY □SCC	Attorney Gauntlett & Associates	100.00	125	5.00 P06	125.00	
01/24/2006	Ameriquest Capital Corporation	□IND □COM 図OTH □PTY □SCC		-1,400.00	100	0.00 P06	1,500.00	
01/24/2006	Ameriquest Capital Corporation	☐IND ☐COM 図OTH ☐PTY ☐SCC		1,500.00	100	.00 P06	1,500.00	
			. SUBTOTAL\$	325.00				
1. Amount red	A Summary ceived this period – itemized monetary contributions. I Schedule A subtotals.)			32,649.00	IND - Ind	utor Codes dividual Recipient Comm		
2. Amount red	ceived this period – unitemized monetary contributions	of less than \$	S100 e	5,484.00	1 (other than PTY Other (e.g., bus	(or SCC)	
3. Iolai mone	etary contributions received this period. 1 and 2. Enter here and on the Summary Page, Colur		•		SCC-Si	olitical Party mall Contributo	r Committee	

Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDU	I C A	CONT
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CALIFORNIA

Statement covers period

01/01/2006

NAME OF FILER				through <u>03/17/2</u>				of <u>54</u>
Pat Bates fo	or Supervisor					1.D. NUN		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF. AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO D. CALENDAR YEA (JAN. 1 - DEC. 3	R	1	R ELECTION TO DATE REQUIRED)
03/13/2006	Armour Building Company	☐IND ☐COM 図OTH ☐PTY ☐SCC	•	1,000.00	1,000	.00	P 06	1,000.00
01/26/2006	Brenton R. Babcock	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Attorney Knobbe, Martens, et al.	100.00	100	.00	P 06	100.00
03/03/2006	Nancy J. Baumann	⊠IND □COM □OTH □PTY □SCC	CPA	100.00	100	.00	P 06	100.00
01/26/2006	Caroline J. Beeson	☑IND □COM □OTH □PTY □SCC	Attorney Capital Pacific	100.00	100	.00 1	P 06	100.00
03/13/2006	Carolyn K. Ben	∏сом Потн	Executive Aqua Ben Corp	200.00	200.	.00 I	9 06	200.00

SUBTOTAL \$

1,500.00

□scc.

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH - Other (e.g., business entity) PTY - Political Party

Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period

250.00

1,200.00

SUBTOTAL \$

				from01/01/2	006	FOR	M 400
		·		through 03/17/2	006	,age	<u>5</u> of 54
NAME OF FILER			•			.D. NUMBE	
Pat Bates fo	or Supervisor	•	· •		1	1265511	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO D CALENDAR YEA (JAN. 1 - DEC. 3	R	PER ELECTION TO DATE (IF REQUIRED)
03/13/2006	Best Best & Krieger LLP	☐IND ☐COM 図OTH ☐PTY ☐SCC		500.00	500	.00 P0	1,500.00
01/19/2006	Philip F. Bettencourt	⊠IND □COM □OTH □PTY □SCC	Real Estate Consultant Bettencourt & Associates	250.00	250	.00 P0	250.00
01/26/2006	John Biggar	⊠IND □COM □OTH □PTY □SCC	Retired None	100.00	100	.00 P0	300.00
03/13/2006	Blair Revelle Communications, Inc.	□IND □COM 図OTH □PTY □SCC		100.00	100	.00 PO	6 100.00
03/03/2006	Brio Tuscany Grille	DIND		 			

□сом

MTO[X] □ PTY □scc

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC) OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

250.00 P 06

250.00

Type or print in ink. Amounts may be rounded to whole dollars.

		LEA (CONI.)
Statement covers period	CALIFORNIA	460
from 01/01/2006	FORM	460
through 03/37/300		

SCHEDING A COOL

NAME OF FILER				urrougn_ <u>03/1//2</u>	006 Pa	ige7	_ of54
Pat Bates fo	or Supervisor				l	0. NUMBER .265511	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IFCOMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DAT CALENDAR YEAR (JAN. 1 - DEC. 31)		R ELECTION TO DATE REQUIRED)
01/26/2006	Norval L. Bruce	⊠IND □COM □OTH □PTY □SCC	Banker ITLA Capital Corp.	150.00	150.0		150.00
01/19/2006	Kathleen A. Burnham	☑IND □COM □OTH □PTY □SCC	Attorney Law Office of Kathleen Burnham	100.00	100.(00 P 06	100.00
02/22/2006	Stephan Busch	☑IND □COM· □OTH □PTY □SCC	Attorney The Busch Firm	500.00	500.0	00 P 06	500.00
03/03/2006	Marion L. Butterfield	⊠IND □COM □OTH □PTY □SCC	Engineering Manager Boeing Company	100.00	100.0	00 P06	100.00
03/03/2006	Sherri M. Butterfield	IND □COM □OTH □PTY □SCC	Retired .	100.00	100.0	0 P06	100.00
-			SUBTOTAL \$				

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(other than PTY or SCC)

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SCC - Small Contributor Committee

Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDU	LE A (CONT.)
CALIFORNIA FORM	460

Statement covers period

01/01/2006

from.

NAME OF FILER Pat Bates fo	or Supervisor			through <u>03/17/2</u>	1.1	1 ge 8 D. NUMBER 265511	of54
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DA CALENDAR YEAR (JAN. 1 - DEC. 31)		PER ELECTION TO DATE (IF REQUIRED)
01/26/2006	CAA - Charles Abbott Associates, Inc.	□IND □COM ③OTH □PTY □SCC		150.00	150.		
01/26/2006	John L. Campbell	⊠IND □COM □OTH □PTY □SCC	Business Owner John L. Campbell Insurance Agency, Inc.	100.00	100.	00 P06	100.00
01/19/2006	Melody P. Carruth	☑IND □COM □OTH □PTY □SCC	Councilmember City of Laguna Hills	1,000.00	1,000.	00 P 06	1,125.00
02/22/2006	Catalina Channel Express Inc.	□IND □COM ☑OTH □PTY □SCC		1,000.00	1,000.0	00 P06	1,000.00
01/31/2006	Coffee Importers	□IND □COM ☑OTH □PTY □SCC		250.00	250.0	0 P06	375.00
			SUBTOTAL \$	2,500.00			

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Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period

				from01/01/2		FORM		
NAME OF FILER				through_03/17/2			_ of _ 54	
Pat Bates fo	or Supervisor				i	I.D. NUMBER 1265511		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IFSELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DA CALENDAR YEAR (JAN. 1 - DEC. 31)	. 1	PER ELECTION TO DATE F REQUIRED)	
03/13/2006	Cofiroute Global Mobility, LLC	☐IND ☐COM 図OTH ☐PTY ☐SCC	•	500.00	500.	00 P 06	1,374.00	
01/26/2006	Conexant Systems, Inc.	☐IND ☐COM 図OTH ☐PTY ☐SCC		1,500.00	1,500.	00 P 06	1,500.00	
03/13/2006	Cook's Corner	⊠IND □COM □OTH □PTY □SCC	•	500.00	1,500.	00 P06	1,500.00	
03/13/2006	Cook's Corner	⊠IND □COM □OTH □PTY □SCC		1,000.00	1,500.	00 P 06	1,500.00	
01/31/2006	Eugene G. Cox	□COM □OTH	Sales Cox-Ray Corp.	200.00	200.4	00 P06	200.00	

SUBTOTAL \$

3,700.00

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Type or print in ink.

Amounts may be rounded to whole dollars.

CALIFORNIA

Statement covers period

from <u>01/01/2006</u>

NAME OF FILER Pat Bates fo	or Supervisor			through 03/17/20	006	Page _ I.D. NU 1265		of <u>51</u>
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR	•	RELECTION TO DATE REQUIRED)
03/17/2006	Lorri M. Crowe	IND COM OTH PTY SCC	Executive Townsend Public Affairs	500.00	50	0.00	P 06	1,500.00
02/22/2006	C. David Culbertson	⊠IND □COM □OTH . □PTY □SCC	Planning CAA Nevada, LLC	1,000.00	1,00	0.00	P 06	1,000.00
03/03/2006	Ruth E. De Nault	⊠IND □COM □OTH □PTY □SCC	Owner De Nault Hardware	100.00	10	0.00	P 06	200.00
03/13/2006	Merrill A. De Vre	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Homemaker None	100.00	10	0.00	P 06	150.00
01/26/2006	Deemark, LLC	□IND □COM 図OTH □PTY □SCC		300.00	30	0.00	P 06	300.00
			· SUBTOTAL	2,000.00				

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SCC - Small Contributor Committee

Type or print in ink.

Amounts may be rounded to whole dollars.

	SCHEDULE A (CONT.)
Statement covers period	CALIFORNIA AGO
from 01/01/2006	FORM 460
through <u>02/17/2006</u>	Page11 of54
	I.D. NUMBER

Pat Bates fo	or Supervisor					UMBER 5511	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRE	
01/31/2006	Richard E. Dietmeier	⊠IND □COM □OTH □PTY □SCC	Retired'	100.00	100.00		75.00
01/16/2006	Douglas Bender and Associates	☐IND ☐COM 図OTH ☐PTY ☐SCC		500.00	500.00	P 06 56	00.00
01/26/2006	Patricia S. Douglass	⊠IND □COM □OTH □PTY □SCC	Vice President, Government Relations Pacific Life Insurance	100.00	100.00	P 06 25	50.00
03/15/2006	Ranney E. Draper	☑IND □COM □OTH □PTY □SCC	Executive Spring Creek Investors	100.00	100.00	P 06 10	00.00
01/31/2006	Bob Ferguson	□COM	Oil Exploration Bob Ferguson-Independent	100.00	100.00	P 06 70	00.00
			SUPTOTAL		NO CONTRACTOR CONTRACTOR CONTRACTOR		

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(other than PTY or SCC)

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Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

FORM

Statement covers period

01/01/2006

NAME OF FILER Pat Bates fo	or Supervisor			through 03/17/2	I.D.	12 NUMBER 65511	_ of <u>54</u>
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)		ER ELECTION TO DATE REQUIRED)
01/31/2006	Kathleen M. Ferguson	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Retired None	100.00	100.00	P 06	100.00
01/31/2006	Karen Davis Ferlauto	⊠IND □COM □OTH . □PTY □SCC	Administrator . County of Orange	100.00	100.00	P 06	325,00
03/13/2006	Vito Ferlauto	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Retired None	100.00	100.00	P 06	100,00
03/07/2006	Gabriel Ferrucci	⊠IND □COM □OTH □PTY □SCC	Owner Ferrucci Properties LLC	-1,500.00	-1,500.00	P 06	1,500.00
01/31/2006	Richard O. Frazee	☑IND □COM □OTH □PTY □SCC	Retired None	150.00	150.00		150.00

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PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA ACO

Statement covers period

				from01/01/2	006	F	ORM	400
NAME OF FILER		~		through _03/17/2	006	Page .	13_	of54
	or Supervisor					I.D. NL	MBER 511	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR	Т	ELECTION O DATE REQUIRED)
01/26/2006	Fuscoe Engineering, Inc.	□IND □COM ☑OTH □PTY □SCC	•	100.00	10	00.00	P 06	100.00
01/31/2006	Michael E. Gagnet	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Executive Vice President Makar Properties	250.00	25	50.00	P 06	250.00
01/31/2006	Carl W. Garrett	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Retired None	100.00	10	00.00	P 06	100.00
03/13/2006	Rose Marie Gross	⊠IND □COM □OTH □PTY □SCC	Sales Manager Shelby's Car Alarms	200.00	20	00.00	P 06	470.00
03/03/2006	Harrington Geotechnical Engineering Inc	□IND □COM 図OTH □PTY □SCC		100,00	10	00.00	P 06	350.00
			SUBTOTAL \$	750.00				

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(other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period

				from01/01/2			DRM	460
NAME OF FILER				through <u>03/17/2</u>	006	Page _	14 of	54
Pat Bates fo	or Supervisor					I.D. NUN	MBER	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTERNAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO D CALENDAR YEA (JAN. 1 - DEC. 3	R I	TO	ECTION DATE QUIRED)
03/14/2006	Robert Gillies	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	100.00			P 06	500.00
01/26/2006	Government Solutions, Inc.	☐IND ☐COM ☑OTH ☐PTY ☐SCC		249.00	249	.00	P 06	374.00
03/03/2006	GPM Management Services Corp	□IND □COM 図OTH □PTY □SCC		100.00	100	.00 I	P 06	700.00
01/26/2006	Roger A. Grable	⊠IND □COM	Attorney Manatt Phelps & Phelps	100.00	100	.00 [9 06	100.00
03/13/2006	Thomas G. Grable	□COM	Executive William Lyon Homes	100.00	100.	.00 P	06	100.00
			' SUBTOTAL \$	649.00			(President)	* -

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH - Other (e.g., business entity) PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.

Amounts may be rounded to whole dollars.

	SCHEDULE A (CONT.)
Statement covers period	CALIFORNIA 460
from 01/01/2006	FORM 400
through <u>03/17/2006</u>	Page 15 of 54
	I.D. NUMBER

Pat Bates fo	or Supervisor					126551	1	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO D CALENDAR YEA (JAN. 1 - DEC. 3	R	PER ELI TO D (IF REQ	ATE
03/15/2006	Harriet A. Harris	⊠IND □COM □OTH □PTY □SCC	Owner * Harris-Taylor Management	500.00	500	.00 Р	06	500.00
01/26/2006	Helen B. Hills	XIND COM OTH PTY SCC	Entreprenuer Little Bohemian	100.00	100	.00 Р	06	100.00
01/31/2006	Susan W. Hinman	IND COM OTH PTY SCC	Retired . None	100.00	100	.00 P	06	225.00
01/06/2006	Martha House	IND COM OTH STY	Accountant Martha House, CPA	100.00	100	.00 P	06	100.00
01/24/2006	HRP Landesign	□IND □COM ☑OTH □PTY □SCC		250.00	250	.00 P	06	250.00
			SUBTOTAL \$	1.050.00				

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Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period

Monetary	Contributions Received	to whole o		Statement covers period from01/01/2006			FORNI/ ORM	460
				through <u>03/17/2</u>	006	Page	16	of 54
NAME OF FILER						I.D. NU	MBER	
Pat Bates fo	or Supervisor	• .	· .			1265	511	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	'EAR	•	RELECTION FO DATE REQUIRED)
01/31/2006	Jeannie Hyde	☑IND □COM □OTH □PTY □SCC	Business Owner Jeannie Hyde Packing, Inc.	100.00	1	00.00	P 06	100.00
01/31/2006	Suzanne Jones	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	School Administrator Orange Unified School District	100.00	1	00.00	P 06	100.00
02/22/2006	KB Home Coastal, Inc.	□IND □COM 図OTH □PTY □SCC		500.00	5	00.00	P 06	500.00
03/13/2006	Martyn Hoffmann	IND □COM □OTH □PTY □SCC	Intermediary Driftwood Ohana Holdings & Properties	200.00	2	00.00	P 06	200.00
03/15/2006	Lee Huessener	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Financial Consultant A.G. Edwards	200.00	2	00.00	P 06	300.00
			SUBTOTAL	\$ 1 100 00			•	10 Sept. 18

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OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA FORM

Statement covers period

01/01/2006

NAME OF FILER	:	· · · · · · · · · · · · · · · · · · ·		through 03/17/2		age _		of <u>54</u>
Pat Bates fo	or Supervisor				I.D. NUMBER 1265511			
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO D CALENDAR YEA (JAN. 1 - DEC. 3	R		RELECTION TO DATE , REQUIRED)
03/13/2006	Human Performance Institute	☐IND ☐COM ☑OTH ☐PTY ☐SCC	•	100.00	100	.00	P 06	225.00
01/26/2006	Heidi Larken-Reed	⊠IND □COM □OTH □PTY □SCC	Consultant Heidi Larkin-Reed	1,500.00	1,500	.00	P 06	1,500.00
03/03/2006	Inland Group Inc	□IND □COM 図OTH □PTY □SCC		500.00	500	.00	P 06	1,350.00
03/03/2006	Saundra F. Jacobs	⊠IND □COM □OTH □PTY □SCC	Principal SFC Consultants	500.00	500	.00	P 06	500.00
03/13/2006	JL Hare Associates, Inc.	□IND □COM □OTH □PTY	· .	100.00	100	.00	P 06	100.00

SUBTOTAL \$

2,700.00

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Amounts may be rounded to whole dollars.

SCHE	DULE A	(CONT.)

CALIFORNIA

FORM

Statement covers period

01/01/2006

NAME OF FILER Pat Bates fo	AME OF FILER Pat Bates for Supervisor			through 03/17/2	006	Page . I.D. NU 1265	IMBER	of <u>54</u>
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	1	LELECTION TO DATE REQUIRED)
03/03/2006	Ken Spiker and Associates, Inc.	□IND □COM 図OTH □PTY □SCC	·	250.00	2	50.00	P 06	250.00
03/03/2006	E. John Koch	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Retired None	100.00	1	00.00	P 06	100.00
03/13/2006	Law Offices of Verlyn N. Jensen	□IND □COM 図OTH □PTY □SCC		500.00	5	00.00	P 06	500.00
01/26/2006	Matt Lawson	⊠IND □COM □OTH □PTY □SCC	Private Investigator Matt Lawson	100.00	1	00.00	P 06	100.00
03/13/2006	Kathleen Lechner	⊠IND □COM □OTH □PTY	Artist	100.00	1	00.00	P 06	225.00

SUBTOTAL \$

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PTY - Political Party

Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE	A (CONT.)
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CALIFORNIA

FORM

Statement covers period

from ____01/01/2006

			through 03/17/20	03/17/2006 Pa		Page 19 of 54				
NAME OF FILER						I.D. NU	MBER			
Pat Bates fo	r Supervisor	•	•			1265	511	PER ELECTION TO DATE (IF REQUIRED)		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR	TODATE			
03/03/2006	Christopher M. Leo	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Regional Director St Joseph Health System	100.00	10	00.00	P 06	100.00		
01/31/2006	Richard A. Mackaig	⊠IND □COM □OTH □PTY □SCC	Retired None	100.00	16	00.00	P 06	300.00		
01/26/2006	Market Director Orange County	□IND □COM 図OTH □PTY □SCC		275.00	2.	75.00	P 06	275.00		
01/26/2006	Alejandro J. Martinez	⊠IND □COM □OTH □PTY □SCC	Business Consultant Alejandro J. Martinez P.E.	100.00	10	00.00	P 06	100.00		
02/22/2006	Donald D. Mason	□IND □COM 図OTH □PTY □SCC	Retired . None	100.00	10	00.00	P 06	100.00		
	SUBTOTAL\$ 675.00									

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PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink. Amounts may be rounded to whole dollars.

SCH	EDUL	FA	(CONT)

CALIFORNIA

Statement covers period

	•			from01/01/2	006	FORM	400
WANTE OF EN ES				through <u>03/17/</u> 2	006	°age2	10_ of _ 54_
NAME OF FILER	y		-			D. NUMBER	
Pat Bates fo	or Supervisor	•	·•			1265511	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO D CALENDAR YEA (JAN. 1 - DEC. 3	R	PER ELECTION TO DATE (IF REQUIRED)
03/03/2006	Mary Aileen Matheis	☑IND □COM □OTH □PTY □SCC	Attorney Law Offices of Mary Aileen Matheis	100.00	100	.00 P06	100.00
03/15/2006	JoAn L. McDonald	☑IND □COM □OTH □PTY □SCC	Retired None	100.00	100	.00 P06	100.00
01/26/2006	W. W. McDonald	⊠IND □COM □OTH □PTY □SCC	Retired	100.00	100	.00 P06	100.00
03/15/2006	Patrick McIntosh	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Officer Orange County Fire Authority	100.00	100	.00 P06	100.00
03/03/2006	Robert Donald McIntyre	XIND	Attorney	100.00	100	00 006	600.00

Law Offices of R. Donald McIntyre

SUBTOTAL \$

500.00

Сом

□отн

□ PTY □scc

*Contributor Codes

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(other than PTY or SCC) OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

100.00 P06

600.00

Type or print in ink.

Amounts may be rounded

SCHEDULE A (CONT.)

·		to whole d	-	from01/01/2		FORM 460		
NAME OF FILER				through <u>03/17/2</u>	006	Page_	21 of 54	
Pat Bates for	r Supervisor					I.D. NUN 1265	· · · · · · · · · · · · · · · · · · ·	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER	AMOUNT RECEIVED THIS	CUMULATIVE TO		PER ELECTION	

		1		T		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
01/31/2006	Barbara S. Merriman	⊠IND □COM □OTH □PTY □SCC	Executive Orange County Planning Commission	100.00	100.00	P 06 150.00
03/03/2006	Robert J. Miller	⊠IND □COM □OTH □PTY □SCC	Retired None	100.00	100.00	P 06 450.00
03/13/2006	Fred Minagar	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Commissioner County of Orange	100.00	100.00	P 06 100.00
03/03/2006	Jim Mirrotto	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Insurance Jim Mirrotto Insurance	100.00	100.00	P 06 100.00
01/26/2006	William D. Naeve	·XIND COM OTH PTY SCC	Attorney Law Offices of William D. Naeve	100.00	100.00	P06 100.00
			SUBTOTAL \$	E00.00		

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Type or print in ink.
Amounts may be rounded to whole dollars

SCHEDULE A	CONT.
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,		to whole dollars.		from01/01/20	·	CALIFORNI FORM	^A 460
	· · · · · · · · · · · · · · · · · · ·			through <u>03/17/20</u>		Page 22	of 54
NAME OF FILER		•				I.D. NUMBER	
Pat Bates for	r Supervisor					1265511	
	FULL NAME STREET ADDRESS AND ZIR CODE OF CONTRIBUTOR	IF AN IND	IVIDITAL ENTED	AMOUNT	CURAL ATRICATO		5.71.70.00

		· · · · · · · · · · · · · · · · · · ·				
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTERNAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
03/15/2006	Ruby L Netzley	☑IND □COM □OTH □PTY □SCC	Councilmemeber City of Dana Point	100.00	100.00	P06 325.00
03/03/2006	Harold V. Nootbaar	⊠IND □COM □OTH □PTY □SCC	Retired None	100.00	100.00	P 06 200.00
03/03/2006	Tom O'Malley	☑IND □COM □OTH □PTY □SCC	Retired None	100.00	100.00	P 06 100.00
03/13/2006	Forrest F. Owen	⊠IND □COM □OTH □PTY □SCC	Retired None	475.00	475.00	P06 1,500.00
03/03/2006	Mary L. Owen	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Homemaker None	500.00	525.00	P 06 525.00
	•		SUBTOTAL			**************************************

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Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

Statement covers period

				from <u>01/01/2</u>	006	ORM	TOU
				through 03/17/2	006 Page	23	of 54
NAME OF FILER		······		7710	I.D. N	JMBER	
Pat Bates fo	or Supervisor		•		126	5511	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR . (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)		R ELECTION TO DATE REQUIRED)
03/13/2006	Mary L. Owen	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Homemaker None	25.00	525.00	P 06 525,00	
01/31/2006	Pacific Environmental Planning	□IND □COM 図OTH □PTY □SCC		150.00	150.00	P 06	475.00
03/13/2006	George J. Pagano	⊠IND □COM □OTH □PTY □SCC	Real Estate Broker Prudential CA Realty	200.00	200.00	P 06	1,175.00
03/15/2006	Philip L. Anthony Inc	☐IND ☐COM 図OTH ☐PTY ☐SCC		500.00	500.00	P 06	900.00
03/15/2006	Thomas H. Purcell	·XIND COM OTH PTY SCC	Executive Spring Creek Investors	100.00	100.00	P 06	100.00

SUBTOTAL \$

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SCHEDULE A (CONT.)

CALIFORNIA

Statement covers period

from 01/01/2006

NAME OF FILER	·			through_03/17/20		ege	24_	of51		
Pat Bates fo	or Supervisor						.265511			
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DA CALENDAR YEAR (JAN. 1 - DEC. 31)	≀	PER ELECTION TO DATE (IF REQUIRED)			
01/26/2006	Leslie Ann Ray	⊠IND □COM □OTH □PTY □SCC	Community Activist Leslie Ann Ray	150.00	150.	00	P 06	150.00		
01/19/2006	Rick Engineering Company	☐IND ☐COM 図OTH .☐PTY ☐SCC		500.00	500.	00	P 06	500.00		
03/15/2006	Steven J. Ross	⊠IND □COM □OTH □PTY □SCC	Partner Duncan Capital	100.00	100.	00	P 06	100.00		
01/31/2006	San Clemente Sportfishing, Inc. dba Dana Wharf Sportfishing	□IND □COM 図OTH □PTY □SCC		500.00	500.	00	P 06	500.00		
01/26/2006	Francine Pace Scinto	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Asset Manager Orange County Associates	150.00	150.	00]	P 06	150.00		
	* SUBTOTAL\$ 1,400.00									

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Type or print in ink.

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SCHEDULE A (CONT.
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CALIFORNIA

Statement covers period

				from <u>01/01/20</u>	006	FORM			
				through _03/17/26	006 Pag	e 25	of 54		
NAME OF FILER				- 	I.D.	NUMBER			
Pat Bates fo	r Supervisor		,		12	65511			
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)			R ELECTION TO DATE REQUIRED)		
03/13/2006	Susan W. Senescu	⊠IND □COM □OTH □PTY □SCC	Homemaker None	100.00	100.0	D P 06	100.00		
03/03/2006	Sheldon Group	☐IND ☐COM ☑OTH ☐PTY ☐SCC		500.00	500.0	0 P 06	500.00		
03/15/2006	Aisha Simjee	IND COM OTH PTY SCC	Retired None	150.00	150.0	0 P 06	150.00		
03/16/2006	South Coast Apartment Association CAAPAC (#745208)	□IND 図COM □OTH □PTY □SCC		1,000.00	. 1,000.0	0 P 06	1,000.00		
03/13/2006	Roy F. Stephenson	⊠IND □COM □OTH □PTY □SCC	Civil Engineer Berryman & Heniger	100.00	100.0	0 P 06	300.00		
			SUBTOTAL	\$ 1,850.00					

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SCHEDULE A (CONT.)

CALIFORNIA

FORM

Statement covers period

from 01/01/2006

NAME OF FILER Pat Bates for Supervisor				through <u>03/17/20</u>	006	Page 26 of 54 I.D. NUMBER 1265511				
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IFSELF-EMPLOYED, ENTER NAME OF BUSINESS)	RECEIVED THIS CALENDAR YEAR		RECEIVED THIS CALENDAR YEAR		EAR	T	ELECTION O DATE EQUIRED)
03/13/2006	Daniel T. Stetson	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	COO Ocean Institute	100.00	10	00.00	P 06	225.00		
03/13/2006	Julie L. Stevens	⊠IND □COM □OTH □PTY □SCC	Realtor Coldwell Banker	100.00	10	00.00	P 06	200.00		
03/15/2006	James J. Strebig	IND □COM □OTH □PTY □SCC	Physician James J Strebig MD	150.00	1:	50.00	P 06	150.00		
03/03/2006	Sukut Construction, Inc.	□IND □COM 図OTH □PTY □SCC		250.00	2	50.00	P 06	250.00		
01/19/2006	Templeton Planning Group	□IND □COM 図OTH □PTY □SCC		500.00	5	00.00	P 06	500.00		
			' SUBTOTAL	1,100.00						

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SCHEDULE A (CONT.)

CALIFORNIA

FORM

Statement covers period

01/01/2006

NAME OF FILED					006	Page .	27	of <u>51</u>		
NAME OF FILER Pat Bates for Supervisor						I.D. NU 1265				
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)		RECEIVED THIS CALENDAR YEAR			R ELECTION TO DATE REQUIRED)
03/17/2006	Gary Thompson	IND COM OTH PTY SCC	Consultant GST Consulting	750.00	79	50.00	P 06	1,125.00		
03/03/2006	Tierra Verde Industries	☐IND ☐COM 図OTH ☐PTY ☐SCC		1,000.00	1,00	00.00	P 06	1,000.00		
03/17/2006	Christopher Townsend	□IND □COM· 図OTH □PTY □SCC	President Townsend Public Affairs, Inc.	100.00	10	00.00	P 06	1,500.00		
01/31/2006	Franklin D. Tucker	☑IND □COM □OTH □PTY □SCC	Retired None	50.00	19	50.00	P 06	250.00		
03/13/2006	Franklin D. Tucker	☑IND □COM □OTH □PTY □SCC.	Retired . None	100.00	1:	50.00	P 06	250.00		
			SUBTOTAL	2,000.00						

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OTH - Other (e.g., business entity)

PTY - Political Party

Type or print in ink.

Amounts may be rounded to whole dollars

SCHEDULE A (C

Monetary Contributions Received		to whole d		from01/01/20	C/A	FORM 460			
				through _03/17/20	006 Pa	je <u>28</u>	of <u>54</u>		
NAME OF FILER					1	NUMBER			
Pat Bates fo	or Supervisor	·		*	1:	265511			
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTERNAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DAT CALENDAR YEAR (JAN. 1 - DEC. 31)		ER ELECTION TO DATE REQUIRED)		
03/13/2006	VESystems Corporation	□IND □COM ☑OTH □PTY □SCC		500.00	500.0	0 P 06	500.00		
03/03/2006	Margaret Waters	⊠IND □COM □OTH □PTY □SCC	Executive Magnauson & Waters	350.00	350.0	00 P06	350.00		
01/31/2006	Margaret A. Webb	⊠IND □COM □OTH □PTY □SCC	Homemaker None	300.00	300.	00 P 06	300.00		
03/03/2006	Western Flooring Associates	□IND □COM 図OTH □PTY □SCC	:	100.00	100.	00 P06	725.00		
03/13/2006	Western Medical Center - Santa Ana	☐IND ☐COM 図OTH ☐PTY ☐SCC		1,500.00	1,500.	00 P06	1,500.00		
			' SUBTOTAL	.\$ 2.750.00					

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.

Amounts may be rounded to whole dollars.

CALIFORNIA

Statement covers period

				from01/01/2	006	FO	RM	-400
				through _03/17/2	006	Page	29 (of54
NAME OF FILER			· · · · · · · · · · · · · · · · · · ·			I.D. NUM	BER	· · · · · · · · · · · · · · · · · · ·
Pat Bates fo	r Supervisor		•			12655	11	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO D CALENDAR YEA (JAN. 1 - DEC. 3		TO	ELECTION DDATE EQUIRED)
03/13/2006	W. Paul Whitelock	⊠IND □COM □OTH □PTY □SCC	Realtor' Re/Max Realty	100.00	10	00.00	P 06	300.00
02/22/2006	Scott C. Whitmore	⊠IND □COM □OTH □PTY □SCC	CPA Scott C. Whitmore, Certified Public Accountant	100.00	1(00.00	P 06	100.00
03/13/2006	Joann M. Williams	IND □COM □OTH □PTY □SCC	Homemaker None	100.00	` 10	00.00	P 06	100.00
	,	□IND □COM □OTH □PTY □SCC				·		
		□IND □COM □OTH □PTY □SCC						
			SUBTOTAL	\$ 300.00				

*Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

Schedule B – Part	1
Loans Received	

Type or print in ink.

SCH	IEDU	LEB-	PART

Loans Received	Amo	from01/01	/2006	FORM 460				
SEE INSTRUCTIONS ON REVERSE					through03/17	/2006	Page30	of54_
NAME OF FILER							I.D. NUMBER	
Pat Bates for Supervisor							1265511	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER LD. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(¢) AMOUNT PAI OR FORGIVE THIS PERIO	CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Patricia Bates		, chiob		[] PAID	PERIOD	12.1100	LOAN	
		1,000.00	0.00	\$O.0	- \$	0.00% % RATE	\$	\$ 128,000.00 PER ELECTION** \$06 129,000.00
TEN IND COM OTH PTY SCC		\$	\$	\$	DATE DUE	\$	05/01/2004 DATE INCURRED	s
Patricia Bates		0.00	128,000.00	PAID \$ 0.0 FORGIVEN 0.0	128,000.00	0.00% % RATE	\$ 128,000.00 \$ 03/17/2006	\$ 128,000.00 PERELECTION** P06 129,000.00
TEN IND COM OTH PTY SCC				☐ PAID	DATE DUE		DATE INCURRED	
				\$FORGIVEN		RATE	\$	\$PER ELECTION **
TO IND COM OTH PTY SCC		\$	s	\$	DATE DUE	\$	DATE INCURRED	\$
		SUBTOTALS S	128,000.00	\$ 0.	00 \$ 129,000.00	\$ 0.00		
Schedule B Summary						(Enter (e) on Schedule E, Line 3)		
Loans received this period (Total Column (b) plus unitemized loans	s of less than \$100.)	•••••••••••••••••••••••••••••••••••••••		\$	128,000.00	- (†0	Contributor Codes	s
 Loans paid or forgiven this period (Total Column (c) plus loans under \$100 (Include loans paid by a third party that) paid or forgiven.) are also itemized on Sched	dule A.)			0.00	- C	ID – Individual OM – Recipient Ci (other than TH – Other (e.g., TY – Political Part	PTY or SCC) business entity)
Net change this period. (Subtract Line Enter the net here and on the Summary	e 2 from Line 1.)y Page, Column A, Line 2.	•••••••••••••••••••••••••••••••••••••••	••••••	NET \$	128,000.00 (May be a negative number)	S	CC - Small Contri	butor Committee
*Amounts forgiven or paid by another party also it is frequired.	must be reported on Schedule A.						EDDC Farm	400/1

Schedule C Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded to whole dollars.

SCHEDULE C Statement covers period CALIFORNIA 01/01/2006

				*	Trom	01/01/2008		FUI	XIVI	
SEE INSTRUCT	TIONS ON REVERSE				thro	ugh <u>03/17/2006</u>		Page 3	1 of	54
	for Supervisor							I.D. NUMB 126551		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION GOODS OR SERV	OF VICES	AMOUNT/ FAIR MARKET VALUE	CUMULAT DAT CALENDA (JAN 1 - D	E R YEAR	PER ELE TO DA (IF REQL	TE
	Jeanette Krembas : ,	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Realtor Prudential California Realty	Event Supplies	S	153.30		182.39	P 06	182.3
01/31/2006	Jeanette Krembas	☑IND □COM □OTH □PTY □SCC	Realtor Prudential California Realty	Event Beverage	es	29.09		182.39	P 06	182.3
		☐IND ☐COM ☐OTH ☐PTY ☐SCC	•							
		☐IND ☐COM ☐OTH ☐PTY ☐SCC		·			•			
Attach add	ditional information on appropriately label	led continuat	ion sheets.	SUBTO	STAL \$	182.39				rii)
1. Amount i (Include	e C Summary received this period – itemized nonmonetary all Schedule C subtotals.)	•••••	·			182.39	IND-	ributor Cod Individual Recipien	t Committee	
Total non	received this period – unitemized nonmoneta amonetary contributions received this period. es 1 and 2. Enter here and on the Summary					182.39	PIY-	– Other (e - Political P	an PTY or So .g., business Party ntributor Com	entity)

Schedule E **Payments Made**

Type or print in ink.
Amounts may be rounded, to whole dollars.

Statement covers period	CALIFORNIA ACO
from01/01/2006	FORM 46U
through	Page32_ of54
	I.D. NUMBER
	1265511

							1		
SEE INSTRUCTIONS ON REVERSE	·			thro	ugh <u>03/1</u>	7/2006	Page	32 of .	54
NAME OF FILER					· · · · · · · · · · · · · · · · · · ·		I.D. NUME	ER	
Pat Bates for Supervisor							1265511		
CODES: If one of the following codes accurately describes CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member common meetings and office expen petition circul phone banks polling and spostage, deli	munications d appearances ses lating survey researd ivery and mes	3	RAD RFD SAL TEL TRC TRS TSF VOT	radio airtime returned co campaign w t.v. or cable candidate tr staff/spouse transfer bet voter regist	e and production ntributions workers' salaries airtime and prod avel, lodging, and travel, lodging, ween committees	uction costs I meals and meals s of the sam	e candida	; ; ate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE C	R	DESCRIPTIO	N OF PAYMEN	ī		AMOU	INT P AID
Aliso Niguel News		PRT							900.00
Aliso Niguel News		PRT						1	,012.50
Betty Presley & Associates, Inc.		PRO							750.00
* Payments that are contributions or independent expenditures	must also be summ	arized on S	chedule D.			รบ	BTOTAL \$	2	2,662.50
Schedule E Summary			•						
1. Itemized payments made this period. (Include all Schedule	E subtotals.)	•••••	•••••••	•••••			\$	179,3	93.11
2. Unitemized payments made this period of under \$100									34.31
3. Total interest paid this period on loans. (Enter amount from	Schedule B, Part	1, Column (e).)	•••••	•••••		\$		0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. $\!$	nter here and on t	he Summar	y Page, Colu	mn A, Line 6	i.)	то	TAL \$	179,5	27.42

Schedule E (C

SCHEDUL	EE(C	CONT.)
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Continuation Sheet)	Amounts may be rounded	Statement covers period	CALIFORNIA 460
Payments Made	to whole dollars.	from 01/01/2006	FORM 400
SEE INSTRUCTIONS ON REVERSE		through 03/17/2006	Page 33 of 54
NAME OF FILER			I.D. NUMBER
Pat Bates for Supervisor			1265511
CODES. If one of the following codes conve	estable describes the newwest way may enter the said. Of	4	**************************************

	1203311
CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* OFC office expens PET petition circul PHO phone banks POL polling and s POS postage, deli	munications RAD radio airtime and production costs l appearances RFD returned contributions ses SAL campaign workers' salaries ating TEL t.v. or cable airtime and production costs
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT AMOUNT PAID
Betty Presley & Associates, Inc.	PRO 340.00
Betty Presley & Associates, Inc.	PRO 750.00
Betty Presley & Associates, Inc.	PRO 750.00
CA Law Enforcement Voter Guide (#598005)	LIT Slate Card 5,700.00
CNA Insurance	OFC 250.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$

7,790.00

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

CALIFORNIA ACO

Statement covers period

Payments Made	to whole do	ilars.	•	from.	01/01/2006	FOR	M 400
SEE INSTRUCTIONS ON REVERSE	•			throu	gh03/17/2006	Page	34 of 54
IAME OF FILER				_		I.D. NUMBI	
Pat Bates for Supervisor						126551	1
CODES: If one of the following codes accurately described campaign paraphernalia/misc. CMP campaign consultants: campaign consultants: contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense campaign literature and mailings	MBR member com MTG meetings an OFC office expen PET petition circu PHO phone banks POL polling and s POS postage, del	munications d appearance ses lating survey researe ivery and me	s	RAD RFD SAL TEL TRC TRS TSF VOT	describe the payment. radio airlime and production returned contributions campaign workers' salaries t.v. or cable airlime and prod candidate travel, lodging, and staff/spouse travel, lodging, transfer between committees voter registration information technology costs	luction costs I meals and meals s of the sam	ie candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	71	CODE (OR DI	ESCRIPTIO	N OF PAYMENT		AMOUNT PAID
California Voter Guide (#595004)	-		Slate Card				
	•	LIT	i. I		•		7,700.00
							.,,,,,,,,
Marilyn Cavanaugh			·				
		FND	[].				225.00
Citizens for Good Government (#599010)			Slate Card				
		LIT					6,700.00
Continuing the Republican Revolution (#598041)			Slate Card				
e - 1							8,000.00
		LIT					
Democratic Voters Choice (#595002)							
(#393002)		LIT	Slate Card				3,000.00
							3,000.00
Day and the same of the same o							
Payments that are contributions or independent expenditures must als	so be summarized on	Schedule D.	•		SU	BTOTAL \$	25 625 00

Schedule E (Continuation Sheet)

CNS campaign consultants

CTB contribution (explain nonmonetary)*

Type or print in ink. Amounts may be rounded

MTG meetings and appearances

OFC office expenses

_			
	Statement covers period		CALIFORNIA 460
	from	01/01/2006	FORM 400
	through_	03/17/2006	Page35 of54
			I.D. NUMBER
			1265511

RFD returned contributions

SAL campaign workers' salaries

Payments Made	to whole dollars.	from 01/01/2006	FORM 400	
SEE INSTRUCTIONS ON REVERSE		through 03/17/2006	Page 35 of 54	
NAME OF FILER			I.D. NUMBER	
Pat Bates for Supervisor			1265511	
CODES: If one of the following codes accur	rately describes the payment, you may enter the code	. Otherwise, describe the payment		
CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production	n costs	

CVC civic donations FIL candidate filing/ballot fees FND fundraising events INO independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger service PRO professional services (legal, accounting print ads	TEL t.v. or cable airtime and production cost TRC candidate travel, lodging, and meals staff/spouse travel, lodging, and meals staff/spouse travel, lodging, and meals transfer between committees of the same	me candidate/sponsor	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID	
Gilliard Blanning Wysocki & Associates	CNS		4,000.00	
Gilliard Blanning Wysocki & Associates	CNS		5,000.00	
Gilliard Blanning Wysocki & Associates	LIT		1,225.00	
Gilliard Blanning Wysocki & Associates	OFC		231.60	
Gilliard Blanning Wysocki & Associates	CNS		5,100.00	
* Payments that are contributions or independent expenditures mus	st also be summarized on Schedule D.	SUBTOTAL	\$ 15,556.60	

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

Statement covers period	CALIFORNIA 460
from01/01/2006	FORM 400
through 03/17/2006	Page 36 of 54
	I.D. NUMBER
	1265511

SEE INSTRUCTIONS ON REVERSE				through 03/17/2006	Page	36 of 54
NAME OF FILER Pat Bates for Supervisor					I.D. NUMBE 126551	
CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* FNS legal defense MTG of the contribution of the contribut	member commeetings and office expens petition circular phone banks polling and supostage, deliverse	nunications appearances ses ating urvey researd very and mes	5	RAD radio airtime and prod RFD returned contributions SAL campaign workers' sa TEL t.v. or cable airtime an TRC candidate travel, lodging TRS staff/spouse travel, location TSF voter registration WEB information technology	nent. uction costs laries id production costs ng, and meals dging, and meals mittees of the sam	: ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)		CODE C	DR DES	CRIPTION OF PAYMENT		AMOUNT PAID
Gilliard Blanning Wysocki & Associates	•	WEB				1,525.00
Gilliard Blanning Wysocki & Associates		POL				12,900.00
Gilliard Blanning Wysocki & Associates	·	TEL .				9,248.00
Hennessey's Tavern		FND				1,081.60
Independent Voters League (#588034)		LIT	Slate Card			2,400.00
* Payments that are contributions or independent expenditures must also be sun	mmarized on	Schedule D.			SUBTOTAL S	27,154.60

Schedule E

Orange County Registrar of Voters

Type or print in ink.

SCHEDULE E (CONT.)

Continuation Sheet)	Amounts may be rounded	Statement covers period	CALIFORNIA 460
Payments Made	to whole dollars.	from01/01/2006	FORM 400
EE INSTRUCTIONS ON REVERSE		through 03/17/2006	- Page 37 of 54
AME OF FILER			I.D. NUMBER
Pat Bates for Supervisor			1265511
ODES: If one of the following codes accura	ately describes the payment, you may enter the code	Otherwise describe the navme	nt

CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs campaign consultants meetings and appearances RFD returned contributions contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs candidate filing/ballot fees FIL PHO phone banks candidate travel, lodging, and meals FND fundraising events polling and survey research staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)* ND postage, delivery and messenger services transfer between committees of the same candidate/sponsor TSF LEG legal defense professional services (legal, accounting) VOT voter registration campaign literature and mailings PRT print ads information technology costs (internet, e-mail) WEB NAME AND ADDRESS OF PAYEE CODE OR DESCRIPTION OF PAYMENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER) AMOUNT PAID Jett Communications OFC 370,50 John F. Kennedy Alliance (#590011) Slate Card 2,800.00 LIT MPower Communications OFC 814.68 Official Non Partisan Voter Guide (#1277947) Slate Card 7,500.00 LIT

FIL

SUBTOTAL \$

12,579.27

1,094.09

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

Schedule E (Continuation Sheet) Payments Made

SEE INSTRUCTIONS ON REVERSE

Type or print in ink.

Amounts may be rounded to whole dollars.

Staten	nent covers period	CALIFORNIA 460
from	01/01/2006	FORM 400
through_	03/17/2006	Page 38 of 54
		I.D. NUMBER
		1265511

NAME OF FILER	I.D. NUME	ER
Pat Bates for Supervisor	. 12655	11
IND independent expenditure supporting/opposing others (explain)* POS postage, deli	munications RAD radio airtime and production costs returned contributions	me candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Orange County Registrar of Voters	FIL	4,401.00
Parents Ballot Guide (#1226502)	Slate Card	5,400.00
Paule Consulting, Inc.	CNS	225.00
Political Data, Inc.	LIT	585.18
Sergio Prince	CNS	7,028.48

SUBTOTAL \$

17,639.66

Schedule E (Continuation Sheet)

Type or print in ink. Amounts may be rounded SCHEDULE E (CONT.)

Statement covers period

(Continuation Sheet) Payments Made SEE INSTRUCTIONS ON REVERSE NAME OF FILER Pat Bates for Supervisor	Amounts may be to whole do			Statement covers period from 01/01/2006 through 03/17/2006	Page	39 of 54 ER
CODES: If one of the following codes accurately descri CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations candidate filing/ballot fees fundraising events IND independent expenditure supporting/opposing others (explain)* legal defense LIT campaign literature and mailings	MBR member common meetings and office expension circul PHO phone banks POL polling and s postage, deli	munications I appearance ses ating urvey researd very and mes	S	RAD radio airtime and production RFD returned contributions SAL campaign workers' salaries t.v. or cable airtime and pro candidate travel, lodging, ar TRS staff/spouse travel, lodging, TSF voter registration WEB	n costs duction costs d meals , and meals es of the san	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE ()R E	ESCRIPTION OF PAYMENT		AMOUNT PAID
Sergio Prince		OFC	·			630.73
Sergio Prince		CNS				5,000.00
Sergio Prince		OFC.				1,488.21
Sergio Prince		CNS				5,000.00
SBC						

OFC

SUBTOTAL \$

12,330.46

211.52

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

Schedule E (Continuation Sheet)

Type or print in ink.
Amounts may be rounded

SCHEDULE E (CONT.)

Statement covers period

Payments Made	Amounts may b to whole do			from	03/15/0005	CALIFO FOR	M 400
EE INSTRUCTIONS ON REVERSE IAME OF FILER				throu	ıgn	Page	40 of 54
Pat Bates for Supervisor		,				I.D. NUMBE	D.
		•				126551	ı
CODES: If one of the following codes accurately describe	es the payment, y	OU may e	iter the code C)thenvice	dogoribo the new		
MP campaign paraphernalia/misc.	MBR member.com	munications	noi tric code. O	RAD			
CNS campaign consultants	MTG meetings an	d appearance	es	RFD	radio airtime and produ returned contributions	iction costs	
CTB contribution (explain nonmonetary)* CVC civic donations	OFC office exper	ises		SAL		aries	
IL candidate filing/ballot fees	PET petition circu			TEL	t.v. or cable airtime and	production costs	
ND fundraising events	PHO phone banks POL polling and s			TRC	candidate travel, lodgin	g, and meals	
independent expenditure supporting/opposing others (explain)*		survey resear	cn essenger services	TRS	staff/spouse travel, lode	ging, and meals	
EG legal defense	PRO professional	services (lec	jal, accounting)	TSF VOT	transfer between community	nittees of the sam	e candidate/sponso
	PRT print ads		u., uoooummg)	WEB		costs (internet, e-	mail\
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR I	DESCRIPTIO	ON OF PAYMENT	(AMOUNT PAID
Shapell Industries				- 			
	•		İ			1	
		OFC	· '			1	
							2,000.00
Shapell Industries							
		OFC					2,000.00
Shapell Industries			 				
•							
	•	OFC					2,000.00
							2,000.00
Sign Strategies							
		CMP					5,750.00
		,	· ·				
			<u> </u>				
South County Signs & Banners							
		CMP				Ì	199.34
•		i					199.34
		ļ					
Payments that are contributions or independent expenditures must also	o ho aummente d	0.1.1.7	<u> </u>				
- mospondent expenditures must air	on na sminimatised ou	ocneaule D.				SUBTOTAL \$	11,949.34

Schedule E (Cor Pay

SCHEDULI	E (CONT.)
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(Continuation Sheet) Payments Made	type or print in ink. Amounts may be rounded to whole dollars.	Statement covers period from 01/01/2006	CALIFORNIA 460
SEE INSTRUCTIONS ON REVERSE		through 03/17/2006	Page 41 of 54
NAME OF FILER			I.D. NUMBER
Pat Bates for Supervisor			1265511

				<u>-</u>
ND independent expenditure supporting/opposing others (explain)* POS postage, deli	munications I appearances ses lating urvey researd very and mes	RAD RFD SAL TEL TRC th TRS ssenger services TSF al, accounting) VOT	describe the payment. radio airtime and production costs returned contributions campaign workers' salaries t.v. or cable airtime and production costs candidate travel, lodging, and meals staff/spouse travel, lodging, and meals transfer between committees of the sar voter registration information technology costs (internet, e	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE C	DESCRIPTION	N OF PAYMENT	AMOUNT PAID
Super Dave's Printing				
	FND			1,308.39
Team California (#598036)		_		
	LIT	Slate Card		6,062.00
The Early Voter Guide (#1264931)	LIŢ	Slate Card		5,700.00
The Monaco Group	LIT		,	6,950.00
The Monaco Group	LIT			8,517.27
	<u> </u>			-

Schedule E (Continuation Sheet)

Type or print in ink.

SCHEDULE E (CONT.)

(Continuation Sheet) Payments Made	Amounts may be to whole do	rounded		Statement covers po	CALIFO	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER Pat Bates for Supervisor		·		through 03/17/20	06 Page IN NUMB	FR
CODES: If one of the following codes accurately described campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations CNS candidate filing/ballot fees CNS fundraising events CNS independent expenditure supporting/opposing others (explain)* LEG legal defense CAMP campaign literature and mailings	MBR member community meetings and office expen-petition circul phone banks POL polling and s postage, deli	munications I appearance ses ating urvey reseau very and me	es	RAD radio airtime and returned contribu SAL campaign worker TEL t.v. or cable airtim TRC candidate travel, TRS staff/spouse trave TSF transfer between VOT voter registration	production costs tions 's' salaries ne and production costs lodging, and meals committees of the san	i ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR C	DESCRIPTION OF PAYMENT		AMOUNT PAID
The Monaco Group		LIT				6,005.00
The Monaco Group		LIT				8,150.00
The St. Regis Monarch Beach		FND .				1,513.02
The St. Regis Monarch Beach		FND	•			1,500.00
Tivoli Terrace		FND				400.00
* Payments that are contributions or independent expenditures must als	o be summarized on	Schedule D.			SUBTOTAL \$	17,568.02

c	CH	וח	•	_	~

Schedule F **Accrued Expenses (Unpaid Bills)**

Type or print in ink. Amounts may be rounded to whole dollars.

MBR member communications

office expenses

phone banks

PHO

petition circulating

meetings and appearances

polling and survey research

postage, delivery and messenger services

Statement covers period 01/01/2006

CALIFORNIA FORM

Page 43 of 54

I.D. NUMBER

1265511

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Pat Bates for Supervisor

CMP campaign paraphernalia/misc.

CTB contribution (explain nonmonetary)*

independent expenditure supporting/opposing others (explain)*

candidate filing/ballot fees

CNS campaign consultants

CVC civic donations

FND fundraising events

through ___03/17/2006

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. RAD radio airtime and production costs

RFD returned contributions SAL campaign workers' salaries

TEL t.v. or cable airtime and production costs

candidate travel, lodging, and meals staff/spouse travel, lodging, and meals

transfer between committees of the same candidate/sponsor

LEG legal defense LIT campaign literature and mailings	PRO professional services PRT print ads	(legal, accounting)	VOT voter registration WEB information technology costs (internet, e-mail)			
NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	
Betty Presley & Associates, Inc.	PND	0.00	471.00	0.00	471.00	
Marilyn Cavanaugh	FND	. 225,00	0.00	225.00	0.00	
Fukushima Photography	LIT	0.00	821.63	0.00	821.63	
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	\$ 225.00	1,292.63	225.00\$	1,292.63	

Schedule F Summary

- 1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for
- 2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on
- 3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and Net change this period. (Subtract Line 2 from Line 1. Enter the difference nere and on the Summary Page, Column A, Line 9.)

 NET \$ 47,475.40

 May be a negative number

NAME OF FILER

Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE F (CONT.)

Statement covers period	CALIFORNIA 460
from01/01/2006	FORM 400
through 03/17/2006	Page 44 of 54
	I.D. NUMBER 1265511
Otherwise, describe the paymen	

Pat Bates for Supervisor CODES: If one of the following codes accurately describes the payment, you may enter the code.

CMP campaign paraphernalia/misc. MBR member communications campaign consultants CNS airtime and production costs meetings and appearances СТВ contribution (explain nonmonetary)* RFD returned contributions office expenses CVC civic donations campaign workers' salaries

PET petition circulating t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks FND fundraising events TRC candidate travel, lodging, and meals POL polling and survey research staff/spouse travel, lodging, and meals ND TRS

independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services **TSF** transfer between committees of the same candidate/sponsor legal defense professional services (legal, accounting)

campaign literature and mailings VOT voter registration PRT print ads WEB information technology costs (internet, e-mail)

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Gilliard Blanning Wysocki & Associates	TEL	. 0.00	2,495.04	0.00	2,495.04
Gilliard Blanning Wysocki & Associates	OFC				
		0.00	513.83	0.00	513.83
Gilliard Blanning Wysocki & Associates	LIT	0.00	3 705 00		
		3.00	1,775.00	0.00	1,775.00
Gilliard Blanning Wysocki & Associates					
wassociates	СМР	0.00	4,885.63	0.00	4,885.63
	SUBTOTALS S	0.00	9,669.50	0.00	9,669.50

LEG

யா

legal defense

campaign literature and mailings

Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE F (CONT.)

CALIFORNIA AGO
FORM 400
Page 45 of 54
I.D. NUMBER
1265511

NAME OF FILER Pat Bates for Supervisor CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating t.v. or cable airtime and production costs TEL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals fundraising events polling and survey research TRS staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain) M postage, delivery and messenger services transfer between committees of the same candidate/sponsor

professional services (legal, accounting)

PRO

PRT

print ads

TSF

VOT

voter registration

WEB information technology costs (internet, e-mail)

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Gilliard Blanning Wysocki & Associates	CNS	0.00	2,000.00	0.00	2,000.00
·	•	•			
Gilliard Blanning Wysocki & Associates	CNS	0.00	5,100.00	0.00	5,100.00
Political Data, Inc.	LIT	0.00	161.14	0.00	161.14
Political Data, Inc.	LIT	0.00	230.61	0.00	230.61
	SUBTOTALS	0.00	7,491.75	0.00	7,491.75

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period	CALIFORNIA 460
from 01/01/2006	FORM 400
through 03/17/2006	Page 46 of 54
	I.D. NUMBER
	1265511

NAME OF FILER

Pat Bates for Supervisor

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

print ads

PRT

CMP campaign paraphernalia/misc. MBR meml
CNS campaign consultants MTG meeti
CTB contribution (explain nonmonetary)* OFC office
CVC civic donations PET petitic
FIL candidate filing/ballot fees

FND fundraising events independent expenditure supporting/opposing others (explain)*

LEG legal defense

LIT campaign literature and mailings

MBR member communications RAD radio airtime and production costs meetings and appearances RFD returned contributions

meetings and appearances

office expenses

petition circulating

RFD returned contributions

campaign workers' salaries

t v or cable airling and prod

petition circulating
TEL t.v. or cable airtime and production costs
phone banks
TRC candidate travel, lodging, and meals
polling and survey research
TRS staff(snouse travel, lodging, and meals)

polling and survey research

postage, delivery and messenger services
professional services (legal. accounting)

TRS

staff/spouse travel, lodging, and meals
transfer between committees of the same candidate/sponsor
voter registration

VOT voter registration
WEB information technology costs (internet, e-mail)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Political Data, Inc.	LIT	0.00	442.83	0.00	442.83
Political Data, Inc.	LIT	0.00	554.14	0.00	554.14
Political Data, Inc.	LIT	. 0.00	4,829.42	0.00	4,829,42
Sergio Prince	OFC	630.73	0.00	630.73	0.00
	SUBTOTALS	\$ 630.73	5,826.39	630.73	5,826.39

NAME OF FILER

Pat Bates for Supervisor

Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE F (CONT.)

Statement covers period	CALIFORNIA 460
from 01/01/2006	FORM 400
through 03/17/2006	Page 47 of 54
	I.D. NUMBER
	1265511

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc. member communications RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances returned contributions CTB contribution (explain nonmonetary)* office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs candidate filing/ballot fees FIL PHO phone banks TRC candidate travel, lodging, and meals FND fundraising events POL polling and survey research staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services transfer between committees of the same candidate/sponsor TSF legal defense professional services (legal, accounting) VOT voter registration campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Sign Strategies	CMP	0.00	3,419.44	0.00	3,419.44
		•			
					¥
The Monaco Group	LIT	0.00	6,610.51	0.00	6,610.51
				·	•
The Monaco Group	LIT	0.00	16,984.12	0.00	36.004.40
				0.00	16,984.12
The St. Regis Monarch Beach	FND	3,013.02	0.00	3,013.02	
				3,013.02	0.00
	SUBTOTALS	3,013.02	27,014.07	3,013.02	27,014.07

Schedule G Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink, Amounts may be rounded to whole dollars.

Statement covers period		CHEDULE G
n01/01/2006	CALIFORNIA FORM	460

4	•	from01/01/2006	FORM 460
SEE INSTRUCTIONS ON REVERSE NAME OF FILER	·	through 03/17/2006	Page 48 of 54
Pat Bates for Supervisor NAME OF AGENT OR INDEPENDENT CONTRACTOR			1.D. NUMBER 1265511
Betty Presley & Associates, Inc. CODES: If one of the following codes accurately described campaign paraphernalia/misc. CNS campaign consultants	bes the payment, you may onto the and		
campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings *Payments that are contributions or independent expenditures must al	MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS porfessional services (legal, accounting) PRT print adaptations	RAD radio airtime and production of returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production of the campaign workers' salaries TRC candidate travel, lodging, and staff/spouse travel, lodging, and	ction costs meals nd meals of the same candidate/sponsor
NAME AND ADDRESS OF PAYEE OR CREDITOR	on contract b.		

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR .		
Ayres Hotel		UR	DESCRIPTION OF PAYMENT	AMOUNT PÁID
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ach additional information on appropriately labeled continuation sheets				

TOTAL* \$

471.00

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Schedule G Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement	SCHEDULE G
Statement covers period om 01/01/2006	CALIFORNIA 460

,		from01/01/2006	FORM 400
SEE INSTRUCTIONS ON REVERSE NAME OF FILER		through 03/17/2006	Page 49 of 54
Pat Bates for Supervisor NAME OF AGENT OR INDEPENDENT CONTRACTOR Gilliard Blanning Wysocki & Associates CODES: If one of the following codes accurately described.	hes the normant		I.D. NUMBFR 1265511
CODES: If one of the following codes accurately descril CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings * Payments that are contributions or Independent expenditures must all	MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads	RAD radio airtime and production of returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production of campaign workers' salaries TRC candidate travel, lodging, and travel.	osts ction costs meals id meals of the same candidate/sponsor
NAME AND ADDRESS OF BUILDING			

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR		
logAtomic		DESCRIPTION OF PAYMENT	AMOUNT PAID
	WEB		
	·	·	1,525.0
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ox Communications, Inc.			
	TEL		
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•	CMP		
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ght Graphics			
	LIT		
	·		1,225.00
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nch additional information on appropriately labeled continuation she			1
	ets.		TOTAL* \$ 16.883.63

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule G Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink. Amounts may be rounded to whole dollars.

Statement covers period	SCHEDULE (
om 01/01/2006	FORM 460

o oma dotto (on benan or mis committee)	to whole dollarş.	from01/01/2006	FORM 460
SEE INSTRUCTIONS ON REVERSE		1	
NAME OF FILER		through <u>03/17/2006</u>	Page50 of54
Pat Bates for Supervisor			
NAME OF AGENT OR INDEPENDENT CONTRACTOR Gilliard Blanning Wysocki & Associates			I.D. NUMBER 1265511
CODES: If one of the following codes accurately described campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings * Payments that are contributions or independent expenditures must als	MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting)	RAD radio airtime and production returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production returned contributions TRC candidate travel, lodging, and staff/spouse travel, lodging	duction costs d meals and meals s of the same candidate/sponsor

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR		
Light Graphics		DESCRIPTION OF PAYMENT	AMOUNT PAID
	LIT		· · · · · · · · · · · · · · · · · · ·
			1,775.0
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Matt Cunningham			•
	CNS		
			2,000.0
latt Cunningham			
	CNS		
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urphy Film Group	1		
a-bul tilm group	TEL		,
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			1,035.00
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ach additional information		<u> </u>	1
ach additional information on appropriately labeled continuation sl	neets		
o not transfer to any other schedule or to the Summary Page. This total may not			TOTAL* \$ 6,810.00

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule G	
Payments M	lade by an Agent or Independent
Contractor (on Behalf of This Committee)

Type or print in ink.

Ctatamant	SCHEDULE
Statement covers period	CALIFORNIA ACO
n01/01/2006	CALIFORNIA 460

Contractor (on Behalf of This Committee)	to whole dollars.	from01/01/2006	FORM 460
EE INSTRUCTIONS ON REVERSE	•	through 03/17/2006	Page 51 of 54
Pat Bates for Supervisor			I.D. NUMBER 1265511
AME OF AGENT OR INDEPENDENT CONTRACTOR Gilliard Blanning Wysocki & Associates			1105511
CODES: If one of the following codes accurately describes the CMP campaign paraphernalia/misc. ME CNS campaign consultants	he payment, you may enter the code. Oth	nerwise, describe the payment. RAD radio airtime and production of	

MTG meetings and appearances CTB contribution (explain nonmonetary)* RFD returned contributions OFC office expenses SAL campaign workers' salaries CVC civic donations petition circulating TEL t.v. or cable airtime and production costs candidate filing/ballot fees phone banks candidate travel, lodging, and meals fundraising events FND POL polling and survey research independent expenditure supporting/opposing others (explain)* staff/spouse travel, lodging, and meals ND postage, delivery and messenger services POS transfer between committees of the same candidate/sponsor LEG legal defense TSF professional services (legal, accounting) VOT voter registration LIT campaign literature and mailings print ads WEB information technology costs (internet, e-mail)

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	
robolsky Research	POL	DESCRIPTION OF PAYMENT	AMOUNT PAID
			12,900.0
tudio Z Recording			
•	TEL		1,460.
:	·		
ach additional information on appropriately labeled continuation sheets.			

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

TOTAL* \$

14,360.04

Schedule G Payments Made by an Agent or Independent

Type or print in ink. Amounts may be rounded

64-4	SCHEDULE
Statement covers period	CALIFORNIA ACO
om 01/01/2006	FORM 460

Contractor (on Behalf of This Committee)	to whole dollarș.	from 01/01/2006	FORM 460
SEE INSTRUCTIONS ON REVERSE .		through 03/17/2006	Page52 of54
Pat Bates for Supervisor			I.D. NUMBER 1265511
NAME OF AGENT OR INDEPENDENT CONTRACTOR Sergio Prince			
CODES: If one of the following codes accurately describ CMP campaign paraphernalia/misc. CNS campaign consultants ; contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings * Bourney to the stress and the stress are stress.	MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads	RAD radio airtime and production RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and prod TRC candidate travel, lodging, and TRS staff/spouse travel, lodging, and	uction costs I meals and meals of the same candidate/sponsor
* Payments that are contributions or independent expenditures must also	so be summarized on Schedule D.		•

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	
iceMax		DESCRIPTION OF PAYMENT	AMOUNT PAID
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Speedy	OFC		l
	OFC		157.6
,			4
			1
			•
Postmaster	POS		
	POS		846.6
			1
h additional information on appropriately labeled continuation sheets.			,

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

TOTAL* \$

1,264.28

Schedule G Payments Made by an Agent or independent Contractor (on Behalf of This Committee)

Type or print in ink.

Amounts may be rounded to whole dollars.

0	SCHEDULE G
Statement covers period	CALIFORNIA AGO
om01/01/2006	FORM 460

Contractor (on Benair of This Committee)	to whole dollars,	from01/01/2006	FORM 460
SEE INSTRUCTIONS ON REVERSE NAME OF FILER		through 03/17/2006	Page53 of54
PAT BATES FOR SUPERVISOR NAME OF AGENT OR INDEPENDENT CONTRACTOR The Monaco Group			I.D. NUMBER 1265511
CODES: If one of the following codes accurately described campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense LTT campaign literature and mailings	MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads	RAD radio airtime and production returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and prod TRC candidate travel, lodging, and staff/spouse travel, lodging, transfer between committees voter registration	duction costs d meals and meals s of the same candidate/sponsor
* Payments that are contributions or independent expenditures must al		WEB information technology costs	(internet, e-mail)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	
Postmaster	LIT	TOTOL TAIMENT	AMOUNT PAID
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Postmaster			
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h additional information on appropriately labeled continuation sheets.			

states additional mormation on appropriately labeled continuation sheets.

TOTAL* \$

12,955.00

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Schedule I	Type or print in ink. Amounts may be rounded to whole dollars.		2011-		
Miscellaneous Increases to Cash			Statement covers period	CALIFORNIA A G	
			noie dollars.	from01/01/2006	FORM 460
SEE INSTRUCTION	NS ON REVERSE			through 03/17/2006	Page 54 of 54
Pat Bates fo	r Supervisor				I.D. NUMBER
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		Di	ESCRIPTION OF RECEIPT	1265511 AMOUNT OF
03/01/2006	SBC		Refund	ESCRIPTION OF RECEIPT	INCREASE TO CASH
			Refund		167.6
			·		
		·			
		•			
				•	
	·				
Attach addit	tional information on appropriately labeled continuation sheets.				
Schedule I				SUBTOTAL	\$ 167.66
I. Itemized in	creases to cash this period				
2. Unitemized	creases to cash this period.	******************	•••••	\$167.66	<u>i</u>
3. Total of all i	I increases to cash of under \$100 this period.		•••••••	\$0.00	<u>)</u>
I. Total misce	interest received this period on loans made to others. (Sche ellaneous increases to cash this period. (Add Lines 1, 2, and	aule H, Colur d 3. Enter he	nn (e).) re and on the	\$0.00	1

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

167.66